PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Complete and Send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Planta, deathness codes and nonfinitention of transistenance fees will be usualled to the current correspondence address as maintenance for our directed otherwise in Block 1, by 0, specifying a new correspondence address; and (b) indicating a separate FEE ADDRESS* for maintenance for nonfifications.						
CURRENT CORRESPONDENCE ADDRESS (Note: Use Black 1 for any change of address)			Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
35690 7590 02/06	/2008				-	
MEYERTONS, HOOD, KIVLIN P.O. BOX 398 AUSTIN, TX 78767-0398	DETZEL, P.C.	I hereby certify that this Focos) Transmission the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being faesimile transmitted to the USPTO (571) 273-2853, on the date indicated below.				
	ſ	Dee	na Be	asley	(Depositor's name)	
		Deer	1a I	Seasler	(Signature)	
		May	6.3	2008 U	(Date)	
APPLICATION NO. FILING DATE		FIRST NAMED INVENT	OR J	ATTORN	NEY DOCKET NO.	CONFIRMATION NO.
08/895,493 07/16/1997		6057-46717 1079				
08/895,493 07/16/1997 MAKOTO SAITO 6057-46717 1079 TITLE OF INVENTION: METHOD FOR CONTROLLING DATABASE COPYRIGHTS						
APPLN, TYPE SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	JE PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional NO	\$1440	\$0	\$0		\$1440	05/06/2008
EXAMINER	ART UNIT	CLASS-SUBCLASS	7			
KLIMACH, PAULA W 2135		713-191000				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.553). (1) the names of up to 3 registered patent attorneys						
Change of correspondence address (or Change of Correspondence		(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		(2) the name of a single firm (having as a member a 2- registered atomory or agent) and the names of try to 2 registered patent atomory or agents. If no name is listed, no name will be printed.				
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Intarsia Software LLC Las Vegas, Nevada						
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government						
riease eneck the appropriate assignee categories (with not or printed on the patient): Introduced Acordonation of other private group entity Introduced Acordonation of other private group entity.						
4a. The following fee(s) are submitted: 4b. Payment of Fce(s): (Please first reapply any previously paid issue fee shown above)						
☐ Issue Fee ☐ A check is enclosed.						
☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies ☐ Advance						ficiency or credit any
Advance Order - # of Copics At The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any verpayment, to Deposit Account Number						
5. Change in Entity Status (from status indicated above)						
☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer elaiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.						
Authorized Signature Delen W.M. Date 5/6/08						
	u lu		Date	5/4	,08.	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which it to file (and by the USFTO or process) an application. Confidentiality is governed by 35 U.S.C. 1.22 and J.C.R.Y. 1.41. this collection is both to confidentiality is governed by 35 U.S.C. 1.22 and J.C.R.Y. 1.41. this collection is both to confidentially in the confidential this collection is sold to confidentially associated by the confidential this collection is desired by the confidence of the strong of the confidence of the

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.